

**JUDICIAL CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**FORM JC/OH  
COVER SHEET PG 1**

The JC/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00088232	2 Total pages filed: 13		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable Cynthia M.	MI	<b>OFFICE USE ONLY</b>		
	NICKNAME	LAST Barbare	SUFFIX	Date Received ELECTRONICALLY FILED 01/14/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE			Date Hand-delivered or Date Postmarked		
	<b>REDACTED PER 254.0313, GOVT CODE</b>			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Mr.	MI			
	NICKNAME	LAST James R. Brosche	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	<b>REDACTED PER 254.0313, GOVT CODE</b>					
7 CAMPAIGN TREASURER PHONE	AREA CODE (817)	PHONE NUMBER 233-5143	EXTENSION			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE			
	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) Court Of Appeals, Justice Place 5 District 5 Dallas			12 OFFICE SOUGHT (if known) Court of Appeals, Chief Justice Place 5 District 5		

**GO TO PAGE 2**

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM JC/OH  
COVER SHEET PG 2**

2 of 13

13 C / OH NAME	Barbare, Cynthia M. (The Honorable)		14 Filer ID (Ethics Commission Filers) 00088232												
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.</p> <table border="1"> <tr> <td><input type="checkbox"/> Additional Pages</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME													
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS													
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME													
		COMMITTEE CAMPAIGN TREASURER ADDRESS													
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00												
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 0.00												
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00												
	4. <b>TOTAL POLITICAL EXPENDITURES</b>		\$ 3,300.56												
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 64,703.82												
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00												
17 AFFIDAVIT															
<p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p>															
<p>The Honorable Cynthia M. Barbare _____ Signature of Candidate or Officeholder</p>															
AFFIX NOTARY STAMP / SEAL ABOVE															
<p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>															
Signature of officer administering oath		Printed name of officer administering oath													
		Title of officer administering oath													

**SUBTOTALS - JC/OH****FORM JC/OH  
COVER SHEET PG 3**

3 of 13

<b>18</b> FILER NAME Barbare, Cynthia M. (The Honorable)	<b>19</b> Filer ID (Ethics Commission Filers) 00088232
<b>20</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	
4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	
11. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	
SUBTOTAL AMOUNT	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 4/13	2 FILER NAME Barbare, Cynthia M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088232
4 Date 11/12/2025	5 Payee name Amazon	
6 Amount (\$) \$435.42	7 Payee address; City; State; Zip Code 251 Little Falls Drive  Wilmington, DE 19808	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Air Purifiers and filters for offices.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name Amazon	
Amount (\$) \$129.87	Payee address; City; State; Zip Code 251 Little Falls Drive  Wilmington, DE 19808	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Air Filter and UV Purifier
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/29/2025	Payee name American Inns of Court	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 225 Reinekers Lane Suite 770 Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 5/13	2 FILER NAME Barbare, Cynthia M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088232
4 Date 12/10/2025	5 Payee name Chico's	
6 Amount (\$) \$150.00	7 Payee address; City; 5600 W. Lover's Lane Suite 147 Dallas, TX 75209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Christmas Gift Card for Court Member.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/10/2025	Payee name Dollar Tree Store	
Amount (\$) \$8.12	Payee address; City; 10606 Garland Road  Dallas, TX 75218	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Court Holiday Party Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Court Holiday Party Supplies - Decorations, Festive Goods, and Party Favors.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/10/2025	Payee name Dollar Tree Store	
Amount (\$) \$9.74	Payee address; City; 10606 Garland Road  Dallas, TX 75218	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Court Holiday Party Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Court Holiday Party Supplies - Decorations, Festive Goods, and Party Favors.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 6/13	2 FILER NAME Barbare, Cynthia M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088232
4 Date 12/10/2025	5 Payee name La Madeleine	
6 Amount (\$) \$37.70	7 Payee address; City; State; Zip Code 3072 Mockingbird Lane  Dallas, TX 75205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage Expense for Court Staff.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/10/2025	Payee name Party Bazaar	
Amount (\$) \$25.76	Payee address; City; State; Zip Code 4435 Lover's Lane  Dallas, TX 75225	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Holiday Party Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Holiday Party Supplies - Party Favors and Festive Goods.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/10/2025	Payee name Starbucks Coffee Company	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 5350 W. Lovers Lane Suite 125 Dallas, TX 75209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Court Staff Attorneys - Christmas Gift Cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 7/13	2 FILER NAME Barbare, Cynthia M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088232
4 Date 12/10/2025	5 Payee name Starbucks Coffee Company	
6 Amount (\$) \$150.00	7 Payee address; City; 9440 Garland Road Casa Linda Plaza Dallas, TX 75218	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Court Holiday Party Gift Cards for Court Staff
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/11/2025	Payee name Starbucks Coffee Company	
Amount (\$) \$220.99	Payee address; City; 9440 Garland Road Casa Linda Plaza Dallas, TX 75218	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Court Holiday Christmas Party - Gift Cards, Coffee and Food.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/04/2025	Payee name Texas Court Reporters Association (TCRA)	
Amount (\$) \$88.09	Payee address; City; 110 E. Corsicana Street  Athens, TX 75751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment for Auction Item.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 8/13	2 FILER NAME Barbare, Cynthia M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088232
4 Date 12/11/2025	5 Payee name Tom Thumb	
6 Amount (\$) \$242.90	7 Payee address; City; State; Zip Code 6333 E. Mockingbird Lane  Dallas, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Christmas Gift Cards for Court Secretaries and Processing Fees for Same
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/18/2025	Payee name UPS Store 5059	
Amount (\$) \$480.00	Payee address; City; State; Zip Code  REDACTED PER 254.0313, GOV'T CODE	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign/Officeholder mailbox rental fee for 1 year.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/10/2025	Payee name Whole Foods Market	
Amount (\$) \$61.99	Payee address; City; State; Zip Code 2118 Abrams Road  Dallas, TX 75214	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Holiday Office Party Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday Office Party Expense - Food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/3 Rpt: 9/13	2 FILER NAME Barbare, Cynthia M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088232	
4 Date 12/10/2025	5 Payee name Albertsons		
6 Amount (\$) \$130.00	7 Payee address; City; 320 Casa Linda Plaza  Dallas, TX 75218		
<input checked="" type="checkbox"/> Reimbursement from political contributions intended	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Christmas Gift Cards for Court Staff Members	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/10/2025	Payee name Albertsons		
Amount (\$) \$137.96	Payee address; City; 320 Casa Linda Plaza  Dallas, TX 75218		
<input checked="" type="checkbox"/> Reimbursement from political contributions intended	Category (See Categories listed at the top of this schedule) Office Party Supplies for Holiday Christmas Party	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Party Items for Holiday Christmas Party - Candy, Plates, Plasticware, etc.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/15/2025	Payee name Dallas Bar Association		
Amount (\$) \$250.00	Payee address; City; 2101 Ross Avenue  Dallas, TX 75201		
<input checked="" type="checkbox"/> Reimbursement from political contributions intended	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Organizational/Membership Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/3 Rpt: 10/13	2 FILER NAME Barbare, Cynthia M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088232	
4 Date 08/15/2025	5 Payee name Enos Pizza Tavern		
6 Amount (\$) \$50.97	7 Payee address; City; 407 N. Bishop Avenue  Dallas, TX 75208		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner Expense - Staff Attorney with Court	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/13/2025	Payee name Foster, Liz		
Amount (\$) \$43.30	Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b> Dallas, TX 75214		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Embroidery Expense For Name on Court Logo Apparel	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Embroidery Expense For Name Stitched on Court Logo Apparel.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/29/2025	Payee name Merchbro Inc/Wristband Bros		
Amount (\$) \$157.58	Payee address; City; State; Zip Code 1005 Main Street Unit 8130 Pawtucket, RI 02860		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lobster Clips and Lanyards for Court Members	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 3/3 Rpt: 11/13	2 FILER NAME Barbare, Cynthia M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088232	
4 Date 07/24/2025	5 Payee name SMU Barnes & Noble Book Store		
6 Amount (\$) \$140.17	7 Payee address; City; State; Zip Code 3060 Mockingbird Lane  Dallas, TX 75205		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Law Books for Intern at Court	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

**NON-POLITICAL EXPENDITURES  
MADE FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE I**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Barbare, Cynthia M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088232
4 Date 08/14/2025	5 Payee name McKinney, Collin B.	
6 Amount (\$) 150.00	7 Payee Address; City; State; Zip 6117 Deer Run Drive  McKinney, TX 75070	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Sprinkler Repair Specialist	(b) Description (See instructions regarding type of information required.) Payment for repairs to home office sprinkler system - Check mistake. Amount refunded to account.

**INTEREST, CREDITS, GAINS, REFUNDS, AND  
CONTRIBUTIONS RETURNED TO FILER****SCHEDULE K**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/1 Rpt: 13/13
<b>2</b> FILER NAME Barbare, Cynthia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00088232
<b>4</b> Date 12/22/2025	<b>5</b> Name of person from whom amount is received Barbare, Cynthia .....	<b>8</b> Amount (\$) \$150.00
	<b>6</b> Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75218	
	<b>7</b> Purpose for which amount is received Refund from check mistake.	<input type="checkbox"/> Check if political contribution returned to filer